

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathias
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M77371**

(6)

1. Corporation Name

FLEET DATA FORMS, INC.



Principal Place of Business

Mailing Address

**3275 W. HILLSBORO BLVD., SUITE 100
DEERFIELD BCH. FL 33442**

**3275 W. HILLSBORO BLVD., SUITE 100
DEERFIELD BCH. FL 33442**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 9. Name and Address of Current Registered Agent

**LEDER, NATHAN I.
5200 BLUE LAGOON DRIVE
STE. 600
MIAMI FL 33126**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0902 and 607.1503, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0905, Florida Statutes.

SIGNATURE

(Signature of Registered Agent)

(Signature of Officer or Director)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	D	[] DELETE
NAME	KURSTIN, GARY	
STREET ADDRESS	7917 GLEN NEVIS TERRACE	
CITY, ST, ZIP	BOCA RATON FL 33496	
TITLE	D	[] DELETE
NAME	SANTANGELO, DAVE	
STREET ADDRESS	18590 SERENA POINTE LANE	
CITY, ST, ZIP	BOCA RATON FL 33496	
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[] Change [] Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	[] Change [] Addition
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	[] Change [] Addition
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	[] Change [] Addition
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	[] Change [] Addition
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	[] Change [] Addition
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or business empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or is changed, or is an addition with an address.

SIGNATURE:

Paul Santangelo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/96

(954) 429-2750

CR2E034 (12/95)